PART B - FEE(S) TRANSMITTAL

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Michaud-Duffy Group LLP					Certificate of MANASATransmission VIA EFS					
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					Delina		gelan		(Depositor's name)	
					Dlive		0/10	ME	(Signature)	
				L	March	19/	2008	_/	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR			ATŢO	RNEY DO	KET NO.	CONFIRMATION NO.	
10/716,794	11/19/2003	John James Daniels 10)2	6787		
TITLE OF INVENTION	ORGANIC AND INO	RGANIC LIGHT ACTIV	E DEVICES AND M	ETHE	DDS FOR MAKE	SG THE	SAME			
	Large									
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEET	DUE	PREV, PAID ISSU	H PEE	TOTAL	FEE(8) DUE	DATE:DUE	
nonprovisional	YES	-8720 1440	, (TT) \$300		\$0 -\$1020		1020	05/27/2008		
EXAMINER		ART UND	CLASS-SUBCLAS				170.			
LIN, JAMES 1792			427-066000	хо						
 Change of corresponde CFR 1.363). 	2. For printing on the patent front page, list Michaud-Duffy									
Change of corresp Address form PTO/SE	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,									
trans.	(2) the name of a	a single firm (having as a member a 2								
"Fee Address" ind PTO/SB/47; Rev 03-0 Number is required.	registered attorney of agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 listed, no name will be printed.									
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print	or typ	e)					
PLEASE NOTE: Unl	ess an assignee is ident h in 37 CFR 3 11. Come	ified below, no assignee detion of this form is NC	data will appear on of	the pa	tent. If an assign	iee is id	dentified b	elow, the do	ocument has been filed for	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
Please check the appropr	iate assignce category or	categories (will not be p	rinted on the patent):	0	Individual 🚨 C	orporati	ion or othe	r private gro	oup entity Government	
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)								shown above)		
ka Issue Fee	A check is enclosed.									
Publication Fee (N	Payment by cred	Payment by credit card. Form PTO-2038 is attached.								
Advance Order - 4	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 503342 (enclose an extra copy of this form).									
5. Change in Entity Stat						~~~				
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Authorized Signature	Date March 19, 2008									
Typed or printed name	Registration No. 40,088									
an application. Confident submitting the completed this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	tiality is governed by 35 I application form to the ions for reducing this bus Firginia 22313-1450. DC 13-1450	U.S.C. 122 and 37 CFR USPTO. Time will vari rden, should be sent to the	1.14. This collection of depending upon the ne Chief Information ( COMPLETED FORM	is esti indivi Office MS. TO	mated to take 12 dual case. Any co r, U.S. Patent and THIS ADDRES:	minutes omment Traden S. SENI	s to comple is on the a nark Office D TO: Cor	ete, includin mount of tir 2. U.S. Depa nmissioner I	thy the USPTO to process) g gathering, preparing, and ne you require to complete street of Commerce, P.O. for Patents, P.O. Box 1450, number.	